

Application Data Sheet

APPLICATION INFORMATION

Application number ::
Filing Date ::
Application Type :: Regular
Subject Matter :: Utility Patent
CD-ROM or CD-R? :: No
Sequence submission? :: No
Computer Readable Form (CRF)? :: No
Title :: Method and Apparatus for Treating the Body
Attorney Docket Number :: 5351
Request for Early Publication? :: No
Request for Non-Publication? :: No
Suggested Drawing Figure ::
Total Drawing Sheets :: 11
Small Entity? :: Yes
Petition included? :: No
Licensed US Govt. Agency :: No
Secrecy Order in Parent Appl.? :: No

APPLICANT INFORMATION

Applicant Authority Type :: Inventor
Primary Citizenship Country :: Viet Nam
Status :: Full Capacity
Given Name :: Bia
Family Name :: Mac
City of Residence :: San Jose
Country of Residence :: U.S.A.
Street of mailing address :: 1394 Tully Road
Suite 210
City of mailing address :: San Jose
State or Province of mailing address :: CA

Country of mailing address ::U.S.A.
Postal or Zip Code of mailing address:: 95122
Applicant Authority Type :: Inventor
Primary Citizenship Country :: U.S.A.
Status :: Full Capacity
Given Name :: John
Family Name :: Iest
City of Residence :: R. Santa Margarita
Country of Residence :: U.S.A.
Street of mailing address :: 30394 Esparanza
City of mailing address :: R. Santa Margarita
State or Province of mailing address :: CA
Country of mailing address :: U.S.A.
Postal or Zip Code of mailing address:: 92688
Applicant Authority Type :: Inventor
Primary Citizenship Country :: U.S.A.
Status :: Full Capacity
Given Name :: Theresa
Family Name :: Quach
City of Residence :: San Jose
Country of Residence :: U.S.A.
Street of mailing address :: 2865 Cicero Way
City of mailing address :: San Jose
State or Province of mailing address :: CA
Country of mailing address :: U.S.A.
Postal or Zip Code of mailing address:: 95148

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 26936
Name :: Shoemaker and Mattare, Ltd.
Street of mailing address :: 10 Post Office Road, Suite 100
City of mailing address :: Silver Spring
State or Province of mailing address :: MD

Country of mailing address :: US
Postal or Zip Code of mailing address:: 20910
Phone number :: 301-589-8900
Fax Number :: 301-589-8885
E-Mail address :: cfallow@shomat.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 26936
Representative Designation :: Primary
Registration Number :: 28946
Representative Name :: Charles W. Fallow
Representative Designation :: Primary
Registration Number :: 24946
Representative Name :: Allen P. Rosenberg